## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALO	ID NO.	DATE
FEE DETERMINATION	N : A		02/23/01
O.I.P.E. CLASSIFIER		8	03//6/01
FORMALITY REVIEW	AS.	90	04/05/01
RESPONSE FORMALITY REVIEW	76-1	/ <del>-</del>	0-7

## **INDEX OF CLAIMS**

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If more than 150 claims or 10 actions staple additional sheet here BEST AVAILABLE COPY

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